PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

IS01457 MCG

CLAIMS AS FILED - PART I							SMALL	SMALL ENTITY		OTHER THAN	
_	-:		(Column	11) /	(Column 2)		TYPE [TYPE		SMALL ENTITY	
T	OTAL CLAIMS	,	15				RATE	FEE	7	RATE	FEE
FC	OR		NUMBER	FILED !	NUMB	BER EXTRA	BASIC FE	385.00	OR	BASIC FEE	770.00
TC	OTAL CHARGEA	ABLE CLAIMS	15 mir	nus 20= *•			X\$ 9=		OR	X\$18=	
<u> </u>	DEPENDENT CI	· · · · · · · · · · · · · · · · · · ·		inus 3 = *	ســِ	_	X43=	1	OR	X86=	
ML	JLTIPLE DEPEN	NDENT CLAIM PR	RESENT				+145=		OR		
* If	the difference	e in column 1 is	less than ze	ero, enter "0)" in c	olumn 2	TOTAL	+	OR		770
	C	CLAIMS AS A	MENDEL) - PART !	11			<u> </u>	7 _	OTHER	
		(Column 1)	1000	(Column	1 2)	(Column 3)	SMALL	ENTITY	OR	SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBEF PREVIOUS PAID FOR	R SLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	X43=	1	OR	X86=	
	FIRST PHESE	ENTATION OF ML	JLTIPLE DEF	'ENDENT CL	_AIM		+145=		OR	+290=	
							TOTAL		┧ _{╱╏} ╵	TOTAL	
		(Onlymn 1)		Oshima	71	· · · · · · · · · · · · · · · · · · ·	ADDIT: FEE		JOR ,	ADDIT. FEE	
		(Column 1) CLAIMS	7	(Column :		(Column 3)		T	1 <i> </i>	, ₁	
ENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUS PAID FOR	R SLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
IME	Independent	*	Minus	***		=	X43=		OR	X86=	i
Ľ	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	'ENDENT CL	_AIM		i	1	1		
						•	+145=		OR	+290=	i
					*		TOTAL ADDIT. FEE		OR ,	TOTAL ADDIT. FEEL	
_		(Column 1)	(Column 3)	-							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	R SLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM		*	Minus	**		=	X\$ 9=		OR	X\$18=	
IME	Independent	<u> </u>	Minus	***		=	X43=	 		X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							 	OR		
* H	the entry in colur	mn 1 is less than the	- ontovin colu	2 write "0"	' in coli	a	+145=		OR	+290=	
**	f the "Highest Nurr	mber Pr viously Pai	id For" IN THIS	S SPACE is less	ss than	n 20, enter "20."	ADDIT. FEE	•	OR A	TOTAL ADDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											